Assessment

B. SURVEILLANCE

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH

(a.) KY Birth Registry (Birth to age 5)	95 - KY	96 - KY	95 - ADD	96 - ADD	95 - CO	96 - CO
•Births with congenital anomalies		Not yet available		Not yet available		Not yet available
•Deaths attributed to congenital anomalies		Not yet available		Not yet available		Not yet available
(b.) KY Child Fatality Review (Birth to age 18)						
•Total deaths	750	253				
•Unexplained child deaths		Not yet available		Not yet available		
(c.) Childhood Injuries (Birth to age 18) (d.) Occupational Injuries	Every day me medical treat injuries to chi 8,700,000 er offices.	ore than 39,000 tment, totaling i ildren ages 14 i nergency room	ochildren are more than 14 and under res visits and mo	injured serious million children ult in 246,000 t re than 11,000	ly enough to re each year. nospitalizations ,000 visits to p	equire Each year s, nearly hysicians
(d.) Occupational injuries		96 - KY	95 - ADD	96 - ADD	95 - CO	96 - CO
-Fatal injuries - Total		96 - KY	95 - ADD	96 - ADD	95 - CO	96 - CO
•Fatal injuries - Total - Agricultural	141	96 - KY 145 39	95 - ADD	96 - ADD	95 - CO	96 - CO
	141	145	95 - ADD	96 - ADD	95 - CO	96 - CO
- Agricultural	141	145	95 - ADD	96 - ADD	95 - CO	96 - CO
- Agricultural - Non-agricultural	141 50 91	145	95 - ADD	96 - ADD	95 - CO	96 - CO

Assessment B. SURVEILLANCE

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH - Continued

(e.) Environmental Exposure	96 - 97	KY	97 - 98	97 - 98 KY		ADD		ADD		7 CO	97 - 98 CO	
•Lead exposure												
- Screened for lead	43,7	25	33,90	4								
- Elevated lead levels >10ug/dL	6,55	4	4,88	2								
(f.) KY Cancer Registry*	95 - 1	(Y	96 - I	(Y	95 - /	ADD	96 - /	ADD	95 -	со	96 -	со
	#	Rate	#	Rate	#.	Rate	#	Rate	#	Rate	#	Rate
•												
•												
•												
•												
•												
(g.) Health Related Statistics												
•Deaths total (all ages)	37,085	960.7	37,193	957.7								
Under 1 year	391	732.1	385	722.2								
1 - 4 years	100	47.0	76	35.9							, <u>.</u>	
5 - 14 years	114	N/A	122	N/A								
15 - 24 years	525	87.3	509	84.3								
25 - 54 years	4,504	N/A	4,464	N/A								
55 - 74 years	12,531	N/A	12,548	N/A								<u> </u>
75 + years	18,920	8414.2	19,089	8285.6				<u> </u>				<u></u>

Rate = Crude Rate: all ages per 1,000 total population N/A = Combined age groups - rate not available *Identify cancer specific to county Rate = Age adjusted rate

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH - Continued

(g.) Health Related Statistics (continued)	95 -	· KY	96 -	KY	95 - /	ADD	96 -	ADD	95 -	СО	96 -	СО
 Leading causes of death - Total Population 	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate
- All causes	37,085	960.7	37,193	957.7								
- Heart Disease	12,089	313.2	11,801	303.9								
- Malignant Neoplasms	8,854	229.4	9,060	233.3								
- Cerebrovascular Disease	2,509	65.0	2,639	68.0								
- Unintentional Injuries	1,645	42.6	1,693	43.6							.,	
- Influenza and Pneumonia	1,476	38.2	1,350	34.8								
- Diabetes Mellitus	941	24.4	939	24.2					.			
- Suicide	484	12.5	498	12.8								
- Nephritis and Nephrosis	477	12.4	547	14.1								
- Arteries, Arterioles, Capillaries	469	12.1	445	11.5								
- Septicemia	397	10.3	414	10.7			,					

Rate = Crude Rate per 100,000 population except for "All Causes" rates per 1,000

B. SURVEILLANCE Assessment

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH - Continued

(g.) Health Related Statistics (continued)	95 -	KY	96 -	KY	95 -	ADD	96 - /	ADD	95 -	со	96 - 0	co
•Selected Causes of death-Total Population	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate
- Lung Cancer	3,056	79.2	3,123	80.4								
- Motor vehicle crashes	839	21.7	810	20.9								<u> </u>
- Female Breast Cancer	631	31.7	612	30.6								
- Cirrhosis of Liver	332	8.6	336	8.7								
- Homicide	260	6.7	237	6.1								
- Congenital Anomalies	180	4.7	196	5.0								
- Drug related deaths	113	2.9	140	3.6								

Rate = Crude Rate per 100,000 per total population

B. SURVEILLANCE

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH - Continued

(g.) Health Related Statistics (continued)	95 -	КҮ	96 - 1	KY	95 - A	DD	96 - A	DD	95 - 0	co	96 - (co
•Births	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate	#	Rate
- Total	52,054	13.5	52,509	13.5								
- Age of mother			\;									
Under 15 years	186	1.4	179	1.4								
15 - 17 years	3,298	40.5	3,142	38.5								
18 - 19 years	5,495	89.1	5,617	90.3								
20 - 24 years	15,948	108.3	15,579	105.8		·						
25 - 29 years	13,696	103.1	14,360	108.0								
30 - 34 years	9,470	61.8	9,415	63.2					L			
35 - 39 years	3,368	21.2	3,602	22.6								
40 - 44 years	554	3.7	559	3.7								
45 + years	21	0.2	31	0.2								
- % and # not entering prenatal care 1st trimester	8,020	15.4%	7,835	15.3%								
- Marital status Non-married	14,780	3.8	15,503	4.0								

Rate = Crude Rate per 1,000 per total population

Age Specific Rate = under 15 per 1,000 female population age 10 - 14 years;

45 and over per 1,000 female population age 45 - 49 years;

all other ages per 1,000 female population in specified age group.

B. SURVEILLANCE Assessment

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH - Continued

(g.) Health Related Statistics (continued)	95 -	· KY	96 -	KY	95 - /	ADD	96 -	ADD	95	- CO	96 -	СО
- Educational level of mother	#	%	#	%	#	%	#	%	#	%	#	%
< 9 years	2,078	4.0%	2,063	3.9%								
9 - II years	10,004	19.2%	9,962	19.0%				·				
12 years	20,140	38.7%	19,805	37.7%								
13 - 15 years	10,853	20.8%	11,183	21.3%								
16 + years	8,866	17.0%	9,361	17.8%								

Assessment B. SURVEILLANCE

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH - Continued

(g.) Health Related Statistics (continued)	95	- KY	96	- KY	95 -	ADD	96 -	ADD	95	· co	96	- CO
•Low birth weight live births	#	Rate										
- Total	3,966	7.6	4,155	7.9								
- Age of mother												
Under 15	21		16									
15 - 19	802		803									
20 - 29	2,113		2,284									
30 - 39	975		1,005									
40+	52		45									
	#	%	#	%	#	%	#	%	#	%	#	%
- # and % not entering prenatal care 1st trimester	Not yet available											
- Marital status Non-married	Not yet available											
- Education level of mother	Not yet available											
•Stillbirths	#	Rate										
- Total	395	7.6	365	7.0							3	
- % and # not entering prenatal care 1st trimester	73	18.5%	61	16.7%								

Rate = Crude rate per 1,000 total live births
NOTE: Local survey information should be utilized when obtainable for more specific information when state information is all that is available.

C. COMMUNICABLE DISEASE CONTROL

(1.) REPORT ANIMAL BITES WITHIN 12 HOURS

	Total # reported to health dept	Total # reported timely to health dept	Total # reported by medical provider	Total # reported timely by medical provider	Problem Statement / Comments
•Reported to the health department					Data not collected appropriately - modify current form.
-Medical care sought					
-Medical care not sought					

(2.) REPORTABLE DISEASES (EPI 200)

•Report within 24 hours	Local health departments may conduct a prospective study of the quality of disease reporting in your county. This study should contain the following information:
•Report within one (1) business day	(1) total number of reportable diseases reported to the health department; (2) total number of reportable diseases reported
•Report within five (5) business days	timely to the health department; (3) total number of reportable diseases reported by medical provider; (4) total number of reportable diseases reported timely by medical provider; and (5)
•Report on a weekly basis	was laboratory analysis performed for confirmation? When conducting this study a more efficient and convenient reporting system can be developed in your county.

(3.) MONITORING NON-REPORTABLE DISEASES

•Infant/Pre-School	Given the fact that gathering of people gives rise to the
•School Age	possibility of communicable diseases, we will focus on groups for Communicable Disease Control.
•Work Force	groups for Communicable Disease Control.
•Senior Citizens	

D. PUBLIC HEALTH EDUCATION

(1.) EPISODIC AND ON-GOING HEALTH EDUCATION

Education targeted to the general p	public?		If yes	s, is it	adequate*?
	Yes	No	Yes	No	Problem Statement/Comments
(a.) Communicable Disease					
•Animal Bites					
•Reportable Diseases					
•HIV / AIDS					
•Non-Reportable Diseases					
(b.) Immunizations for Children					

(2.) HEALTH PROMOTION / EDUCATION / PREVENTION

Education targeted to the general pu	ublic?		If ye	s, is it	adequate*?
	Yes	No	Yes	No	Problem Statement/Comments
(a.) Behavioral Risk Factors					
•Smoking					
•Sedentary Lifestyle					
•Overweight					
•Nutrition				ļ	
•Alcohol					
•Seatbelt use					
(b.) Child Risk Factors					
 Safety Seats / Child Restraints use 					
•Children's Helmet use					
(c.) Immunizations for Adults					

^{*}Satisfies the identified problem

D. PUBLIC HEALTH EDUCATION

(2.) HEALTH PROMOTION / EDUCATION / PREVENTION - Continued

Education targeted to the general p	ublic?		If yes, is it adequate*?							
	Yes	No	Yes	No	Problem Statement/Comments					
(d.) Youth Risk Behavior										
•Behavior that results in intentional/unintentional injuries										
•Tobacco Use										
•Alcohol/other drug use										
 Sexual behaviors that result in HIV infection/ other STD's 										
•Dietary behaviors										
•Physical activity										
(e.) Women's Health Issues										
(f.) Health Screenings										
•Hypertension										
•Mammograms										
Cervical cancer screening										
Colorectal screening										
•Cholesterol screening										
•Diabetes										
(g.) Day Care/Supervision										
Benefits/availability of adult daycare/activity centers										
Benefits/availability of child care/daycare										
Benefits/availability of after- school activity centers/ activities										

^{*}Satisfies the identified problem

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(2.) HEALTH PROMOTION / EDUCATION / PREVENTION - Continued

Education targeted to the general pu	blic?		lf ye	s, is it	adequate*?	
	Yes	No	Yes	No	Problem Statement/Comments	
(h.) Abuse Prevention to General Public						
•Adult abuse						
•Child abuse and neglect						
(i.) Mental Health Promotion/ Awareness in General Public						
(j.) Violent Crimes Awareness/ Prevention in General Public						
(k.) Motor Vehicle Crash Awareness and Prevention in General Public						
(I.) Air Quality Awareness/ Prevention of Hazards/ Promotion of Improved Quality						
(m.) Oral Disease Prevention						
•% not consuming fluoridated water (all ages)						
•Dental sealants						

^{*}Satisifies the identified problem

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH

Education targeted to the general public? If yes, is it adequate*?											
	Yes	No	Yes	No	Problem Statement/Comments						
(a.) KY Birth Registry											
(b.) KY Child Fatality Review											
(c.) Childhood Injuries						50.0000000					
(d.) Occupational Injuries											
- Agricultural											
- Non-agricultural											
(e.) Environmental Exposure											
•Lead Exposure											
(f.) KY Cancer Registry+											
•											
•											
•											
•											
•											
(g.) Health Related Statistics											
•Births											
- Preconceptional/Perinatal Risk											

⁺As identified in B.(3.)(f.)
*Satisfies the identified problem

E. PUBLIC HEALTH POLICY

(1.) EPISODIC AND ON-GOING HEALTH EDUCATION

	Existing Statement of Policy*		State Nee		Comments	
	Yes	No	Yes	No		
(a.) Communicable Disease						
(b.) Immunizations for Children						

(2.) HEALTH PROMOTION / EDUCATION / PREVENTION

	Existing Statement of Policy*		Statement Needed		Comments	
·	Yes	No	Yes	No		
(a.) Behavioral Risk Factors						
(b.) Child Risk Factors						
(c.) Immunizations for Adults						
(d.) Youth Risk Behavior						
(e.) Women's Health Issues						
(f.) Health Screenings						
(g.) Day Care/Supervision						
(h.) Abuse Prevention to General Public						
(i.) Mental Health Promotion/ Awareness in General Public						
(j.) Violent Crimes						
(k.) Motor Vehicle Crash Awareness and Prevention in General Public						
(I.) Air Quality Awareness/ Prevention of Hazards/ Promotion of Improved Quality						
(m.) Oral Disease Prevention					A line durades associates Coro Hoolth Activitio	

^{*}The detail of content should reflect the global combination of elements listed under previous Core Health Activities

Transition Model 10/98

E. PUBLIC HEALTH POLICY

Assessment

(3.) PREVENTION OF DISEASE / DISABILITY / PREMATURE DEATH

	State	Existing Statement of Policy*		ment ded	Comments
	Yes	No	Yes	No	
(a.) KY Birth Registry					
(b.) KY Child Fatality Review					
(c.) Childhood Injuries					
(d.) Occupational Injuries					
(e.) Environmental Exposure					
(f.) KY Cancer Registry					
(g.) Health Related Statistics					

^{*}The detail of content should reflect the global combination of elements listed under previous Core Health Activities

F. FAMILIES AND CHILDREN RISK REDUCTION

(1.) EPISODIC AND ON-GOING HEALTH EDUCATION

		Private Provision+		Health Dept Provision		to be ded*	Comments	
	Yes	No	Yes	No	Yes	No		
(a.) Communicable Disease								
•Reportable Diseases								
•HIV / AIDS								
•Non-Reportable Diseases								
(b.) Immunizations for Children					-			

(2.) HEALTH PROMOTION / EDUCATION / PREVENTION

	Priv Provi			n Dept rision	2	s to be ided*	Comments	
	Yes	No	Yes	No	Yes	No		
(a.) Behavioral Risk Factors								
•Smoking								
Sedentary lifestyle								
Overweight				<u> </u>				
•Nutrition								
•Alcohol								
•Seatbelt use								
(b.) Child Risk Factors								
- Safety Seats / Child Restraints use								
- Children's Helmet use								
(c.) Immunizations for Adults								

^{*} Includes any unmet need remaining

⁺Provision is focused on prevention of disease not acute care.

F. FAMILIES AND CHILDREN RISK REDUCTION

(2.) HEALTH PROMOTION / EDUCATION / PREVENTION - Continued

	Private Provision+		Healti Prov	n Dept ision	Needs Prov	to be	Comments	
	Yes	No	Yes	No	Yes	No		
(d.) Youth Risk Behavior								
 Behavior that result in intentional/unintentional injuries 								
•Tobacco Use								
•Alcohol/other drug use								
 Sexual behaviors that result in HIV infection / other STD's 								
•Dietary behaviors								
•Physical activity			•					
(e.) Women's Health Issues								
(f.) Health Screenings								
•Hypertension								
•Mammograms								
Cervical cancer screening								
•Colorectal screening								
•Cholesterol screening								
•Diabetes								
(g.) Day Care/Supervision								
Benefits/Availability of Adult Daycare/Activity Centers								
Benefits/Availability of Child Care/Daycare								
Benefits/Availability of After-School Activity Centers/Activities *Includes any upmet need remaining *Includes any upmet need remaining								

^{*}Includes any unmet need remaining +Provision is focused on prevention of disease not acute care.